

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>Hoile</i>		<i>06-27-01</i>
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	<i>CH</i>	<i>1119</i>	<i>08-14-01</i>
RESPONSE FORMALITY REVIEW	<i>M.D.</i>	<i>615</i>	<i>03-21-02</i>

09/887,642

INDEX OF CLAIMS

- ✓ Reflected
- Allowed
- (Through numeral) Canceled
- + Restricted
- N Non-elected
- I Interference
- A Appeal
- O Objected

Claim	Date	Claim	Date	Claim	Date
1	10/5/01	1	10/5/01	1	10/5/01
2	10/5/01	2	10/5/01	2	10/5/01
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